# FORM D

RECEIVED

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## FORM D

ONTICE OF SALE OF SECURITIES PÚRŠUANT TO REGULATION D, **SECTION 4(6), AND/OR** ÖRM LIMITED OFFERING EXEMPTION



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Name of Offering ( Check if this is an amendment and name has changed, and indicate	change.)
Private Placement of \$2,000,000 of 10% Senior Secured Convertible Notes Due March 2008 (Up to 50%)	% Convertible into Common Stock)
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	Rule 4(6) ULOE
Type of Filing: New Filing  Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the Information requested about the issuer	
Name of Issuer ( Check if this is an amendment and name has changed, and indicate changed)	ange.)
VendingData Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
6830 Spencer Street, Las Vegas, Nevada 89119	702-733-7195
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
VendingData Corporation's primary business is the development, manufacturing and marketing of various productivity and profitability of the gaming industry.	ous concepts and products that increase the security,
Type of Business Organization	PROCESSED
☐ limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	APR 0.7 2005
Month Year_	
Actual or Estimated Date of Incorporation or Organization: 0 3 9 9	Actual Estimated THOMSON
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation	\ -18.1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
CN for Canada; FN for other foreign jurisdict	tion) N V

#### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Form D - 3\_05 Senior Note Private Placement \$2m\_ VendingData 12496.00018

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#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Newburg, Mark R. Business or Residence Address (Number and Street, City, State, Zip Code) 6830 Spencer Street, Las Vegas, Nevada 89119 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Douglas H. Caszatt Business or Residence Address (Number and Street, City, State, Zip Code) 6830 Spencer Street, Las Vegas, Nevada 89119 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Crabbe, James E. Business or Residence Address (Number and Street, City, State, Zip Code) 6830 Spencer Street, Las Vegas, Nevada 89119 Check Box(es) that Apply: Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Keil, Ronald O. Business or Residence Address (Number and Street, City, State, Zip Code) 6830 Spencer Street, Las Vegas, Nevada 89119 Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Smith, Bob L Business or Residence Address (Number and Street, City, State, Zip Code) 6830 Spencer Street, Las Vegas, Nevada 89119 General and/or Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Beneficial Owner Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. IN	FORMAT	ION ABOU	T OFFER	RING						
1 11	ha (aa +	۰۱ امسما				ta. at t	un für at f	- CC : 0			Yes			
Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.											$\boxtimes$			
o				·	-		-							
2. What is the minimum investment that will be accepted from any individual?												\$50,000		
3 Does	the offering	nermit ioin	t ownershin	of a single u	nit?						Yes ⊠	No		
	B. Does the offering permit joint ownership of a single unit?										_			
or sin listed of the	nilar remune is an associa broker or d	ration for s ated person ealer. If m	olicitation of or agent of ore than fiv	of purchasers a broker or c e (5) persons or dealer only	in connecti lealer regist to be listed	ion with sale ered with th	es of secur e SEC and	rities in the d/or with a s	offering. I	f a person to es, list the na	be me			
Full Nam	e (Last nam	e first, if in	dividual)								•			
	lphia Brokeras			1.0										
	or Residence		`	and Street, C	•	ip Code)								
	Associated E			, Pennsylvania	19087									
States in	Which Perso	on Listed H	as Solicited	or Intends to	Solicit Pur	chasers	<del></del>	<del>-</del>				<del></del>		
(Check	c "All States"	or check i	ndividual Si	tates)		************				******************		All States		
[AL]	[AK]	[AZ]	[AR]	⊠[CA]		[CT]	[DE]	[DC]	[FL]		HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]		MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	$\boxtimes$ [NY]		[ND]	[OH]		OR]	⊠[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI] [	WY]	[PR]		
Full Nam	ne (Last nam	e first, if in	dividual)											
Rusiness	or Residence	e Address	(Number	and Street, C	ity State 7	(in Code)								
Business	or residence	0 / (44)	(, , , , , , , , , , , , , , , , , , ,	and officer, o	<i>n</i> , oute, 2	p 00 <b>00</b> )								
Name of	Associated I	Broker or D	ealer	<u> </u>		···-								
States in	Which Perso	on Listed H	as Solicited	or Intends to	Solicit Pur	chasers						· · · · · · · · · · · · · · · · · · ·		
(Checl	k "All States	or check i	ndividual S	tates)		•••••					[	] All States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]		[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Nan	ne (Last nam	ie first, if in	idividual)											
Business	or Residenc	e Address	(Number	and Street, C	City, State, Z	Zip Code)								
Name of	Associated I	Broker or D	ealer											
States in	Which Perso	on Listed H	as Solicited	or Intends to	Solicit Pur	rchasers				·				
(Chec	k "All States	" or check i	individual S	tates)	••••	· · · · · · · · · · · · · · · · · · ·				•••••		All State		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	. Enter the aggregate offering price of securities included in this offering and the total amo sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering box and indicate in the columns below the amounts of the securities offered for exalready exchanged.	, check this					
	Type of Security			Aggregate ffering Price		Am	ount Already Sold
	Debt		\$			\$	00,0
	Equity		\$		-	\$	
	☐ Common ☐ Preferred		•		-	•	
	Convertible Securities (including warrants)		\$	2,000,000	)	\$	2,000,000
	Partnership Interests	••••••	\$		_	\$	
	Other (Specify)		\$		_	\$	
	Total		\$	2,000,000	- )	\$	2,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.				-		
2.	2. Enter the number of accredited and non-accredited investors who have purchased secur offering and the aggregate dollar amounts of their purchases. For offerings under Rule 5 the number of persons who have purchased securities and the aggregate dollar amou purchases on the total lines. Enter "0" if answer is "none" or "zero."	04, indicate		Number Investors			Aggregate ollar Amount of Purchases
	Accredited Investors			3	_	\$	2,000,000
	Non-accredited Investors				<u> </u>	\$	0
	Total (for filings under Rule 504 only)					\$	
	Answer also in Appendix, Column 4, if filing under ULOE.						
3.	3. If this filing is for an offering under Rule 504 or 505, enter the information requested for a sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months first sale of securities in this offering. Classify securities by type listed in Part C - Questio	prior to the		Type of		ח	ollar Amount
	Type of offering			Security		D	Sold
	Rule 505					\$	
	Regulation A					\$	
	Rule 504		_			\$	
	Total				_	\$	
4.	4. a. Furnish a statement of all expenses in connection with the issuance and distributed securities in this offering. Exclude amounts relating solely to organization expenses of The information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate.	of the issuer.					
	Transfer Agent's Fees			,		\$	
	Printing and Engraving Costs					\$	
	Legal Fees.				$\boxtimes$	\$	10,000
	Accounting Fees					\$	
	Engineering Fees					\$	
	Sales Commissions (specify finders' fees separately)	• • • • • • • • • • • • • • • • • • • •		******	$\boxtimes$	\$	80,000
	Other Expenses (identify) Placement Agent Expenses		••••	***********		\$	
	Total	•••••		•••••••	$\boxtimes$	\$	90,000

KKB&R

	C. OFFERING I RIC.	E, NUMBER OF INVESTORS,	EAFENSES AND		<u>Or</u>	PROCEE	<i></i>		
	b. Enter the difference between the aggregand total expenses furnished in response to gross proceeds to the issuer."	Part C - Question 4.a. This dif	ference is the "adju	sted				\$	1,910,000
5.	Indicate below the amount of the adjusted g each of the purposes shown. If the amount check the box to the left of the estimate, gross proceeds to the issuer set forth in resp	at for any purpose is not known, The total of the payments listed	furnish an estimate must equal the adju	and		Payments to Officers,		n	
					1	Directors, & Affiliates	,	P	ayments To Others
	Salaries and fees		***************************************		\$		[	□ \$	
	Purchase of real estate				\$		[	□ \$	
	Purchase, rental or leasing and installatio	n of machinery and equipment			\$		1	<b>\$</b>	
	Construction or leasing of plant buildings	and facilities			\$		_	<b>\$</b>	
	Acquisition of other businesses (including offering that may be used in exchange for pursuant to a merger)	the assets or securities of another	issuer	П	\$		1	□s	
	Repayment of indebtedness				\$		_ '	□ \$ □ \$	
	Working capital				\$		_	□ s	
	Other (specify): Fund Operating Losses				\$		_	□ • ⊠ \$	500,000
					\$			—	500,000
					\$			—	910,000
	Column Totals				\$			—	1,910,000
	Total Payments Listed (column totals add	led)					_	1,910,0	000
		D. FEDERAL SIGNA	ATURE						
sig	e issuer has duly caused this notice to be signature constitutes an undertaking by the issuer to any non-	ned by the undersigned duly authorier to furnish to the U.S. Securitie	orized person. If this s and Exchange Co.	mmis	sio				
Iss	uer (Print or Type)	Signature	_			Date	•		
	VendingData Corporation	D. H. Custol					A	April I,	2005
Na	ime of Signer (Print or Type)	Title of Signer (Print or Type)							
	Douglas H. Caszatt	Acting Chief Financial Offi	cer, Secretary and C	Contro	olle	r			
		ATTENTIO	<b>V</b> ————						
In	tentional misstatements or omissions of			See :	181	J.S.C. 100	1.)		

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262	presently subject to any of the disqualification provisions of such rule?.	•••••	Yes	No ⊠			
		See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes CFR 239.500) at such times as required by	to furnish to any state administrator of any state in which this notice is state law.	filed, a notic	ce on For	rm D (17			
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	-	the issuer is familiar with the conditions that must be satisfied to he state in which this notice is filed and understands that the issuer c hat these conditions have been satisfied.						
	he issuer has read this notification and know aly authorized person.	s the contents to be true and has duly caused this notice to be signed or	n its behalf b	y the und	lersigned			
Is	suer (Print or Type)	Signature	Date					
	VendingData Corporation	N. H. Curnell	Apr	il 1, 2005				
N	ame of Signer (Print or Type)	Title (Print or Type)						
	Douglas H. Caszatt	Acting Chief Financial Officer, Secretary and Controller						

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### APPENDIX

1		2	3			4			5 ification
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA		Х	Up to \$2,000,000 of 10% Senior Secured Convertible Notes	1	\$200,000				Х
СО									
СТ									
DE									
DC									
FL									
GA									
НІ									
ID				, , , <del>-</del> -					
IL									
IN									
ΙA									
KS									
KY				1 10 1					
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									

APPENDIX 2 3 4 5 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in State waiver granted) investors in State amount purchased in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors Investors State Yes No Amount Amount Yes No MT NE NV NH NJ NMΧ Up to \$2,000,000 of \$1,750,000 Х NY 10% Senior Secured Convertible Notes NC ND OH OK OR Х Up to \$2,000,000 of 1 Х \$50,000 PA 10% Senior Secured Convertible Notes RI SCSD TN TXUT VT VA WA WVWI WY PR